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Bib Data Sheet

CONFIRMATION NO. 2795

<b>SERIAL NUMBER</b> 09/883,437	<b>FILING OR 371(c) DATE</b> 06/18/2001 <b>RULE</b>	<b>CLASS</b> 438	<b>GROUP ART UNIT</b> 2813	<b>ATTORNEY DOCKET NO.</b> 01 P 10755 US (8055-31)
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**APPLICANTS**

Uwe Paul Schroeder, Dresden, GERMANY;  
 Tobias Mono, Dresden, GERMANY;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 08/13/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

Infineon Technologies North America Corp.  
 c/o Siemens Corporation  
 Intellectual Property Department  
 186 Wood Avenue South  
 Iselin, NJ 08830

**TITLE**

High contrast lithography alignment marks for semiconductor manufacturing

<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> Infineon Technologies North America Corp. c/o Siemens Corporation Intellectual Property Department 186 Wood Avenue South Iselin, NJ 08830					
<b>TITLE</b> High contrast lithography alignment marks for semiconductor manufacturing with LSA					
<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		